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 # OF PAGES (INCLUDING COVER): FILE NAME: ALLE0027-100 / 17641  
 DATE: March 22, 2005 FILE #: 160307

RECIPIENT(S)	PHONE	FAX
USPTO		703-872-9306

Application No.: 10/754,364  
 Entitled: METHODS FOR TREATING VASCULAR DISORDERS  
 Filing Date: January 8, 2004  
 First Named Inventor: Mitchell F. Brin  
 Art Unit: 1651  
 Examiner Name: Lora Elizabeth Barnhard  
 Confirmation No. 7607

Papers: Transmittal Form; Fee Transmittal Form; Amendment And Request For Reconsideration

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

10/754,364

Filing Date

January 8, 2004

First Named Inventor

Mitchell F. Brin

Art Unit

1651

Examiner Name

Lora Elizabeth Barnhart

Attorney Docket Number

ALLE0027-100 (160307) / 17641

## ENCLOSURES (check all that apply)

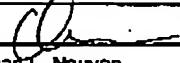
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Cozen O'Connor		
Signature			
Printed Name	Quan L. Nguyen		
Date	March 22, 2005	Reg. No.	46,957

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Signature	
Typed or printed name	Quan L. Nguyen
Date	March 22, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 0)

Complete If Known

Application Number	10/754,364
Filing Date	January 8, 2004
First Named Inventor	Mitchell F. Brin
Examiner Name	Lora Elizabeth Barnhart
Art Unit	1651
Attorney Docket No.	ALLE0027-100 (180307) /17-6-41

## METHOD OF PAYMENT (check all that apply)

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

## Small Entity

Fee (\$)

Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

200

100

360

180

Multiple dependent claims

Fee (\$)

Fee (\$)

Fee Paid (\$)

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer

listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

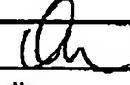
- 100 = / 50 = (round up to a whole number) x =

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : \_\_\_\_\_

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	46,887	Telephone	215-685-2158
Name (Print/Type)	Quan L. Nguyen			Date	March 22, 2005

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In re application of:

Examiner:

Mitchell F. Brin

BARNHART, Lora Elizabeth

Serial No.: 10/754,364

Group Art Unit: 1651

Filed: January 8, 2004

Confirmation No. 7607

For: METHODS FOR TREATING VASCULAR DISORDERS

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**AMENDMENT AND REQUEST FOR RECONSIDERATION**

In response to the Non-Final Office Action mailed January 24, 2005, and March 14, 2005, in connection with the above-identified patent application, Applicant respectfully requests entry of the following amendments and reconsideration of the rejections of record in view of the remarks provided below.